

SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE JUSTICE CENTER: 9 Central <input type="checkbox"/> Harbor <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> West STREET ADDRESS: P.O. BOX: CITY, STATE, AND ZIP CODE:	<i>FOR COURT USE ONLY</i>
SMALL CLAIMS PLAINTIFF'S STATEMENT	CASE NUMBER:

Do not complete this form until you have carefully read the "Information to Plaintiff" sheet. PLEASE PRINT ALL INFORMATION.

State YOUR name and/or business name by checking and completing the appropriate section below:

- 9** Individual: Name _____
- 9** Sole Ownership: Owner's name and business name (d.b.a.) _____
- _____
- 9** Partnership: Name of partners and partnership name _____
- _____
- 9** Corporation: Full name of corporation _____
- _____
- 9** Other: Specify _____
- State YOUR Street address and mailing address _____
- City and Zip Code _____
- Business phone _____ Home phone (if applicable) _____

State the name of each person and/or business you are suing by checking and completing the appropriate section below:

- 9** Individual: Name _____
- 9** Sole Ownership: Owner's name and business name (d.b.a.) _____
- _____
- 9** Partnership: Name of partners and partnership name _____
- _____
- 9** Corporation: Full name of corporation _____
- _____
- 9** Other: Specify _____
- State their street address and mailing address _____
- City and Zip Code _____
- Business phone _____ Home phone (if applicable) _____

See clerk for additional sheet for more plaintiffs or defendants. 9 Additional sheet attached.

1. a. **9** Defendant owes me the sum of: \$ _____, not including court costs, because *(describe claim and date)*:

- b. **9** I have had an arbitration of attorney-client fee dispute. (Attach Attorney-client Fee Dispute form).
2. **9** This claim is against a government agency, and I filed a claim with the agency. My claim was denied by the agency, or the agency did not act on my claim before the legal deadline.
3. a. **9** I have asked defendant to pay this money, but it has not been paid.
- b. **9** I have NOT asked defendant to pay this money because *(explain)*: _____

(Continued on reverse side)

4. This court is the proper court for the trial of this case because:
- A. ☒ A defendant lives in this judicial district or a defendant corporation or unincorporated association has its principal place of business in this judicial district.
- B. ☒ A person was injured or personal property was damaged in this judicial district. (Specify city): _____
- C. ☒ A defendant signed or entered into a contract in this judicial district, a defendant lived in this judicial district when the contract was entered into, a contract or obligation was to be performed in this judicial district, or, if the defendant was a corporation, the contract was breached in this judicial district. (Specify city): _____
- D. ☒ The claim is on a retail installment account or contract subject to Civil Code section 1812.10. (Specify facts): _____
- E. ☒ The claim is on a vehicle finance sale subject to Civil Code section 2984.4. (Specify facts): _____
- F. ☒ Other. (Specify facts): _____
5. I ☒ have ☒ have not filed more than one other small claims action anywhere in California during this calendar year in which the amount demanded is more than \$2,500.
6. I ☒ have ☒ have not filed more than 12 small claims, including this claim, during the previous 12 months.
7. I UNDERSTAND THAT
- a. I may talk to an attorney about this claim, but I cannot be represented by an attorney at the trial in the small claims court.
- b. I must appear at the time and place of trial and bring all witnesses, books, receipts, and other papers or things to prove my case.
- c. I have **no right of appeal on my claim**, but I may appeal a claim filed by the defendant in this case.
- d. If I cannot afford to pay the fees for filing or service by a sheriff, marshal, or constable, I may ask that the fees be waived.
8. I have received and read the information sheet explaining some important rights of plaintiffs in the small claims court.
9. **No defendant is in the military service** ☒ except (name): _____

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

PRINT NAME

SIGNATURE

Service Method: ☒ Marshal or Sheriff ☒ Disinterested party ☒ Certified Mail

FICTITIOUS BUSINESS NAME DECLARATION - C.C.P. 116.430

INSTRUCTIONS

- < If you regularly do business in California for profit under a fictitious business name, you must execute, file, and publish a fictitious business name statement. This is sometimes called a "d.b.a." which stands for "doing business as." This requirement applies if you are doing business as an individual, a partnership, a corporation, or an association. The requirement does not apply to nonprofit corporations and associations or certain real estate investment trusts. You must file the fictitious business name statement with the clerk of the county where you have your principal place of business, or in Sacramento County if you have no place of business within this state.
- < If you do business under a fictitious business name and you also wish to file an action in the small claims court, you must declare under penalty of perjury that you have complied with the fictitious business name laws by filling out the form below.
- < If you have not complied with the fictitious business name laws, the court may dismiss your claim. You may be able to refile your claim when you have fulfilled these requirements.

1. I wish to file a claim in the small claims court for a business doing business under the fictitious name of (specify name and address of business): _____
2. The business is doing business as:
☒ an individual ☒ a partnership ☒ a corporation ☒ an association ☒ other (specify): _____
3. The name of the owner is: _____
The names of the partnership are: _____
4. The business has complied with the fictitious business name laws by executing, filing, and publishing a fictitious business name statement in the court of (specify): _____
5. The number of the statement is: _____ And the statement expires on (date): _____
- I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

PRINT NAME

SIGNATURE

SHORT TITLE: _____ VS. _____

9 Plaintiff 9 Defendant**9 Individual:** Name _____**9 Sole Ownership:** Owner's name and business name (d.b.a.) _____**9 Partnership:** Name of partners and partnership name _____**9 Corporation:** Full name of corporation _____**9 Other:** Specify _____

State street address and mailing address _____

City and Zip Code _____

Business phone _____ Home phone (if applicable) _____

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